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PTO/SB/50 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

| | | | |
|---|--|-----------------|----------------------------|
| Address to: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | Attorney Docket No. | 05471.00017 | 7513 U.S. PTO 10/727325 |
| | First Named Inventor | Kirchgeorg | |
| | Original Patent Number | 6,327,497 | |
| | Original Patent Issue Date (Month/Day/Year) | 12/04/2001 | |
| | Express Mail Label No. | EL 960970262 US | |

APPLICATION FOR REISSUE OF:
(check applicable box)

☒ **Utility Patent**

☐ **Design Patent**

☐ **Plant Patent**

| APPLICATION ELEMENTS (37 CFR 1.173) | ACCOMPANYING APPLICATION PARTS |
|---|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/56) (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification and Claims in a double column copy of patent format (amended, if appropriate)</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (proposed amendments, if appropriate)</p> <p>5. <input checked="" type="checkbox"/> Reissue Oath / Declaration (original or copy) (37 C.F.R. § 1.175)(PTO/SB/51 or 52)</p> <p>6. <input checked="" type="checkbox"/> Power of Attorney</p> <p>7. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check applicable box(es))</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Written Consent of all Assignees (PTO/SB/53)</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)</p> <p>8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table</p> <p>9. Nucleotide and/or Amino Sequence Submission (if applicable, all of the following are necessary)</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CFR)</p> <p style="margin-left: 20px;">b. Specification Sequence Listing on:</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> CD-ROM (2 copies) or CD-R (2 copies); or</p> <p style="margin-left: 40px;">ii. <input type="checkbox"/> paper</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</p> | <p>10. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173(c).</p> <p>11. <input type="checkbox"/> Original U.S. Patent for surrender</p> <p style="margin-left: 20px;"><input type="checkbox"/> Ribbioned Original Patent Grant</p> <p style="margin-left: 20px;"><input type="checkbox"/> Statement of Loss (PTO/SB/55)</p> <p>12. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) (if applicable)</p> <p>13. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>14. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable)</p> <p>15. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>16. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>17. <input checked="" type="checkbox"/> Other: <u>Express Mail Certificate</u></p> |

18. CORRESPONDENCE ADDRESS

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|---|---|---|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | <div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;">22908</div> <p style="font-size: small; margin-top: 5px;">(Insert Customer No. or Attach bar code label here)</p> | <p>or <input type="checkbox"/> Correspondence address below</p> |
| Name | | |
| Address | | |
| City | State | Zip Code |
| Country | Telephone | Fax |

| | | | |
|-------------------|----------------------|-----------------------------------|------------------|
| NAME (Print/Type) | Joseph J. Berghammer | Registration No. (Attorney/Agent) | 46,057 |
| Signature | | Date | December 3, 2003 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 385

Complete if Known

| | |
|----------------------|------------------|
| Application Number | Unassigned |
| Filing Date | December 3, 2003 |
| First Named Inventor | Kirchgeorg |
| Examiner Name | Unassigned |
| Art Unit | Unassigned |
| Attorney Docket No. | 05471.00017 |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit
Account
Number

19-0733

Deposit
Account
Name

Banner & Witcoff, LTD.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|---------------------|----------|--------------|----------|------------------------|-----------------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1001 | 770 | 2001 | 385 | Utility filing fee | |
| 1002 | 340 | 2002 | 170 | Design filing fee | |
| 1003 | 530 | 2003 | 265 | Plant filing fee | |
| 1004 | 770 | 2004 | 385 | Reissue filing fee | 385 |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | | | | (\$ 385) |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims: 19 = 20 = 0 X Fee from below = 0
 Independent Claims: 1 = 3 = 0 X Fee from below = 0
 Multiple Dependent: X Fee from below = 0

| Large Entity | | Small Entity | | Fee Description |
|--------------|----------|--------------|----------|--|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 |
| 1203 | 290 | 2203 | 145 | Multiple dependent claim, if not paid |
| 1204 | 86 | 2204 | 43 | ** Reissue independent claims over original patent |
| 1205 | 18 | 2205 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 0)

***or number previously paid, if greater; For Reissues, see above*

FEE CALCULATION (continued)

3. ADDITIONAL FEES

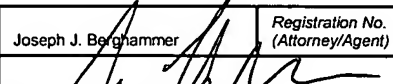
| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet. | |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for reexamination | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | |
| 1252 | 420 | 2252 | 210 | Extension for reply within second month | |
| 1253 | 950 | 2253 | 475 | Extension for reply within third month | |
| 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | |
| 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | |
| 1401 | 330 | 2401 | 165 | Notice of Appeal | |
| 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | |
| 1403 | 290 | 2403 | 145 | Request for oral hearing | |
| 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | |
| 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | |
| 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | |
| 1502 | 480 | 2502 | 240 | Design issue fee | |
| 1503 | 640 | 2503 | 320 | Plant issue fee | |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17 (q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | |
| 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0)

SUBMITTED BY

| | | | | | |
|-------------------|---|-----------------------------------|--------|-----------|------------------|
| Name (Print/Type) | Joseph J. Berghammer | Registration No. (Attorney/Agent) | 46,057 | Telephone | 312-463-5000 |
| Signature |  | | | Date | December 3, 2003 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

CERTIFICATE OF EXPRESS MAIL
(PATENT)

Attorney Docket No. 005471.00017

Express Mail No. EL 960970262 US
Deposited December 3, 2003

I hereby certify that the attached correspondence, identified below, is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" under 37 CFR §1.10 on the date indicated above and is addressed to Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

By: _____



Kirchgeorg, et al., U.S. Continuation Reissue Patent Application for "PORTABLE EMERGENCY OXYGEN AND AUTOMATIC EXTERNAL DEFIBRILLATOR (AED) THERAPY SYSTEM"

- Reissue Transmittal Form (in duplicate)
- Fee Transmittal (in duplicate)
- Application Data Sheet (3 pages)
- Preliminary Amendment
- U.S. Patent No. 6,327,497
- Copy of Consent of Assignee
- Copy of Statement Under 37 CFR 3.73(b)
- Statement Pursuant to 37 C.F.R. 1.173(c)
- Copy of Declaration by Inventor
- Copy of Power of Attorney (1 page)
- Return Receipt Postcard